PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

23380

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(7		(COIL	11111 2)	_	RATE	FEE		RATE	FEE
500			1 /		AU 1140	ED EVIDA		ASIC FEE	385.00		BASIC FEE	770.00
FOR			NUMBER FILED		NUMBER EXTRA		Ë	A310 T EE	303.00	OR		770.00
TC	TAL CHARGEA	ABLE CLAIMS	/ / mir	nus 20=	*			X\$ 9=		OR	X\$18=	
INE	EPENDENT CL	_AIMS	3 minus 3 = /					X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II								•			OTHER	
		(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Column HIGHES		(Column 3)		SMALL ENTITY		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	*	Minus	***		=		X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
ADD								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		70	/DIT. 1 C.C.		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] 			Un		
							Ŀ	+145=		OR	+290=	
										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	į	OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145			1200	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290= TOTAL	
**	lf the "Highest Nu	mber Previously Pa	aid For [*] IN THI	S SPACE i	s less tha	n 20, enter "20.	. AD	TOTAL DIT. FEE		OR	ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												